

# WORK SEARCH LOG



Name: \_\_\_\_\_

Last 4 Digits of Your Social Security #: \_\_\_\_\_

*Please provide detailed information for your required number of weekly work search activities in the space provided below:*

Week of \_\_\_\_\_ to \_\_\_\_\_ (Sun. – Sat.)

## COMPANY #1

Name of Company:		
Address:		
City:	State:	Zip Code:
Name of Contact Person:		
Phone:	Email:	
Method of Contact (in person, phone, email, fax, etc.):		Date of Contact:

## COMPANY #2

Name of Company:		
Address:		
City:	State:	Zip Code:
Name of Contact Person:		
Phone:	Email:	
Method of Contact (in person, phone, email, fax, etc.):		Date of Contact:

## COMPANY #3

Name of Company:		
Address:		
City:	State:	Zip Code:
Name of Contact Person:		
Phone:	Email:	
Method of Contact (in person, phone, email, fax, etc.):		Date of Contact: